



Application Data Sheet

Application Information

Application number::	10/722,209
Filing Date::	11/24/03
Application Type::	Regular
Subject Matter::	Utility
Suggested classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R??::	
Number of CD disks::	
Number of copies of CDs::	
Sequence Submission::	
Computer Readable Form (CRF)?::	
Number of copies of CRF::	
Title::	STEERABLE ULTRASOUND CATHETER
Attorney Docket Number::	021577-000900US
Request for Early Publication::	No
Request for Non-Publication::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	
Small Entity?::	Yes
Latin name::	
Variety denomination name::	
Petition included?::	No
Petition Type::	
Licensed US Govt. Agency::	
Contract or Grant Numbers One::	
Secrecy Order in Parent Appl.::	No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: HENRY
Middle Name::
Family Name:: NITA
Name Suffix::
City of Residence:: Redwood City
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 2047 Seabrook Court
City of Mailing Address:: Redwood City
State or Province of mailing address:: CA
Country of mailing address:: USA
Postal or Zip Code of mailing address:: 94065

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: JEFF
Middle Name::
Family Name:: SARGE
Name Suffix::
City of Residence:: Fremont
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 647 Lonsdale Avenue
City of Mailing Address:: Fremont
State or Province of mailing address:: CA

Country of mailing address:: USA
Postal or Zip Code of mailing address:: 94539

Correspondence Information

Correspondence Customer Number:: 20350

Representative Information

Representative Customer Number:: 20350

Domestic Priority Information

Application:: Continuity Type:: Parent Application:: Parent Filing Date::

Foreign Priority Information

Country:: Application number:: Filing Date::

Assignee Information

Assignee Name:: FLOWCARDIA, INC.
Street of mailing address:: 745 North Pastoria Ave.
City of mailing address:: Sunnyvale
State or Province of mailing address:: CA
Country of mailing address:: USA
Postal or Zip Code of mailing address:: 94085